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| WAIVER/PARTICIPANT RELEASE OF LIABILITY-READ BEFORE SIGNING BY CHECKING YES BELOW, YOU HEREBY AGREE TO WAIVE ANY AND ALL RIGHTS ACCORDING TO THE TERMS OF THIS AGREEMENT.In consideration of being allowed to participate in skateboarding lessons, programs or events, the undersigned acknowledges, understands, and agrees that:1. The risk of injury from the activities involved in skateboard lessons, programs or events, including the potential for permanent disability or death, and while particular rules, safety equipment, instruction and personal discipline may reduce this risk, the risk of serious injury to me does exist: and, 2. I KNOWINGLEY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation: and, 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual or significant concern in my readiness for participation in skateboard lessons, programs or events, I will remove myself from participation and bring such concern to the attention of the nearest official immediately: and, 4. I, for myself and on behalf of my/our heirs, assigns, personal representatives, persons under my guardianship and next of kin, HEREBY RELEASE Oregon skateboard lessons and, its owners, instructors, officers, officials, agents, employees and/or sub-contractors, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, LOSS OR DAMAGE to person or property incident to my involvement or participation in skateboard lessons, programs or events, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.5. I, for myself and on behalf of my/our heirs, assigns, personal representatives, persons under my guardianship and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releases from any and all liabilities incident to my involvement or participation in skateboard lessons, programs or events, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent of the law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. I also waive and release the use of my photograph or likeness for any reason or purpose. I WANT TO PARTICIPATE IN THIS HAZARDOUS SPORT!I AGREE TO ASSUME FULL REPONSIBILITY FOR ALL INJURIES AND MEDICAL EXPENSES INCURED WHILE PARTICIPATING IN SKATEBOARD LESSONS, PROGRAMS OR EVENTS. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS,UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILYWITHOUT ANY INDUCEMENT. I attest that I am physically fit and have been trained for this activity. I also waive and release theuse of my photograph or likeness for any reason or purpose. I WANT TO PARTICIPATE IN THIS HAZARDOUS SPORT!**X** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ Male / Female**PARTICIPANT’S SIGNATURE** DATE WAIVER SIGNED DATE OF BIRTH GENDER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ &/ OR (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PRINTED NAME HOME TELEPHONE NUMBER CELL NUMBERADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HOW YOU HEARD ABOUT US: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DO YOU: \_\_\_\_SKATEBOARD \_\_\_\_INLINE \_\_\_\_BMX-BIKE (MARK ALL THAT APPLY)EMERGENCY CONTACT: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FOR PARTICIPANTS UNDER 18 YEARS OF AGE**This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his |